

02-07-01

GAU 3611

Patent
241/036

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

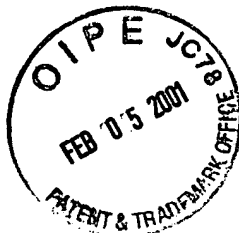
In re the Application of:

Wilson, et al.

Serial No.: 09/309,367

Filed: May 11, 1999

For: METAL SPORTS BOARD



Group Art Unit: 3611

Examiner: F. Vanaman

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AMENDMENT TRANSMITTAL

Box Amendment

Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment for the above-identified application.

- ☐ Applicant(s) petitions for an extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(5)] for the total number of months checked below:

EXTENSION (months)	FEE FOR SMALL ENTITY	FEE FOR OTHER THAN SMALL ENTITY
1 month	<input type="checkbox"/> \$55.00	<input type="checkbox"/> \$110.00
2 months	<input type="checkbox"/> \$195.00	<input type="checkbox"/> \$390.00
3 months	<input type="checkbox"/> \$445.00	<input type="checkbox"/> \$890.00
4 months	<input type="checkbox"/> \$695.00	<input type="checkbox"/> \$1,390.00
5 months	<input type="checkbox"/> \$945.00	<input type="checkbox"/> \$1,890.00

- ☐ An extension for _____ months has already been secured and the fee paid therefor of _____ is deducted from the total fee due for the total months of extension now requested.

SD-159471.1

CERTIFICATE OF MAILING
(37 C.F.R. §1.10)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as 'Express Mail Post Office To Addressee' in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

EL356082750US

Express Mail Label No.

February 05, 2001

Date of Deposit

Line Gauthier

Name of Person Mailing Paper

Signature of Person Mailing Paper

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- ☐ Extension fee due with this Request ____.
- ☐ If an additional extension of time is required, please consider this a petition therefor.

FEES FOR CLAIMS:

- ☒ Applicant claims small entity status pursuant to 37 CFR 1.27.

The fees for claims (37 CFR § 1.16(b)-(d)) have been calculated as shown below:

Total Claims	15	-	20	=	0	x	\$18.00	\$0.00
Independent Claims	1	-	3	=	0	x	\$80.00	\$0.00
Multiple Dependent Claims	\$270	(if applicable)					<input type="checkbox"/>	\$0.00
TOTAL OF ABOVE CALCULATIONS								\$0.00
Reduction by ½ for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.27, 1.28.								\$0.00
TOTAL FEES FOR CLAIMS SUBMITTED HEREWITH								\$0.00

- ☐ A check in the amount of ____ is enclosed to cover the above fee(s).
- ☐ Charge Lyon & Lyon's Deposit Account No. **12-2475** in the amount of ____.
- ☒ The Commissioner is authorized to charge Lyon & Lyon's Deposit Account No. **12-2475** for any fees required under 37 CFR §§ 1.16 and 1.17 that are not covered, in whole or in part, by a check enclosed herewith and to credit any overpayments to said Deposit Account **12-2475**.

Dated: _____

633 West Fifth Street, Suite 4700
Los Angeles, California 90071-2066
(858) 552-8400

Respectfully submitted,

LYON & LYON LLP

By: _____

Stephen C. Beuerle
Reg. No. 38,380

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